

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	KW	70891	9-9
O.I.P.E. CLASSIFIER			3: 9/14/99
FORMALITY REVIEW	TAWB	10976	9-20-99

CM 71632

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral) Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	✓
2		✓	✓
3	✓	✓	✓
4		✓	✓
5		✓	✓
6		✓	✓
7		✓	✓
8		✓	✓
9		✓	✓
10		✓	✓
11		✓	✓
12		✓	✓
13		✓	✓
14		✓	✓
15		✓	✓
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
32			
33			
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
44			
45			
46			
47			
48			
49			
50			

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)